

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(b))--INDEPENDENT INVENTOR

Applicant or Patentee: BENGMARK, StigSerial or Patent No.: TBAFiled or Issued: TBAFor: **CATHETER FOR PROVIDING A FLUID CONNECTION WITH THE SMALL INTESTINE**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled **CATHETER FOR PROVIDING A FLUID CONNECTION WITH THE SMALL INTESTINE** described in:

the specification filed herewith.

application serial no. _____, filed _____, as a national stage entry for PCT International application PCT/SE98/00145, filed internationally on 02 February 1998.

patent no. _____, issued _____.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

no such person, concern, or organization

persons, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention according to their status as small entities. (37 CFR 1.27).

FULL NAME Stig Bengmark

ADDRESS Barytongränd 17, S-220 70 Lund Sweden

INDIVIDUAL SMALL BUSINESS CONCERN NONPROFIT ORGANIZATION

FULL NAME _____

ADDRESS _____

INDIVIDUAL SMALL BUSINESS CONCERN NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Stig Bengmark

Name of First Inventor

Signature of First Inventor

990825

Date

Declaration For U.S. Patent Application

(PTO/SB/01)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor, (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CATHETER FOR PROVIDING A FLUID CONNECTION WITH THE SMALL INTESTINE

the specification of which (Check one of blocks 1, 2 or 3)

1. [] is attached hereto.
2. [X] was filed on 02 February 1998 as International PCT Application Serial No. PCT/SE98/00145 and was amended on _____ (if applicable).
3. [] was filed on _____ as U.S. Application Serial No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

List of Prior Foreign Applications (if applicable)

CERTIFIED COPY ATTACHED?

<u>9700373-5</u> (Application Number)	<u>Sweden (SE)</u> (Country)	<u>04 February 1997</u> (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<u> </u> (Application Number)	<u> </u> (Country)	<u> </u> (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u> </u> (Application Number)	<u> </u> (Country)	<u> </u> (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u> </u> (Application Number)	<u> </u> (Country)	<u> </u> (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No

[] Additional foreign application numbers are listed on the attached sheet, PTO/SB/02B - Supplemental Priority Data Sheet or similar sheet.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below:

List of U.S. Provisional Applications (if applicable)

<u> </u> (Application Number)	<u> </u> (Day/Month/Year Filed)
<u> </u> (Application Number)	<u> </u> (Day/Month/Year Filed)

[] Additional provisional application numbers are listed on the attached sheet, PTO/SB/02B - Supplemental Priority Data Sheet or similar sheet.

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

List of U.S. Parent Application Or PCT Parent Numbers (if applicable)

<u> </u> (Number)	<u> </u> (Day/Month/Year Filed)	(Status: Abandoned; Pending; Patent Number, if applicable)
<u> </u> (Number)	<u> </u> (Day/Month/Year Filed)	(Status: Abandoned; Pending; Patent Number, if applicable)
<u> </u> (Number)	<u> </u> (Day/Month/Year Filed)	(Status: Abandoned; Pending; Patent Number, if applicable)

[] Additional U.S. or PCT international application numbers are listed on the attached sheet, PTO/SB/02B - Supplemental Priority Data Sheet or similar sheet.

And hereby appoint as principal attorneys and agents, James O. Ray, Jr., Reg. No. 27,666; Forest C. Sexton, Reg. No. 22,054; Edmond S. Miksch, Reg. No. 38,558; James R. Stevenson, Reg. No. 38,755; Robert A. Shack, Reg. No. 29,976; Gary J. Falce, Reg. No. 29,304; Elroy Strickland Reg. No. 22,546; Amos Bartoli, Reg. No. 42,299; and Michele Yoder, Reg. No. 41,562.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 of Title 18 and that such willful false statements may jeopardize the validity of the application or any patent issue thereon.

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Inventor's signature: Bengmark Date: 990825

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Full Name of Second Inventor: _____

Inventor's signature: _____ Date: _____

Residence: _____ (Street, City, State, Zip Code, Country) _____

Citizenship _____

Post Office Address _____

Full Name of Third Inventor: _____

Inventor's signature: _____ Date: _____

Residence: _____ (Street, City, State, Zip Code, Country) _____

Citizenship _____

Post Office Address _____

Full Name of Fourth Inventor: _____

Inventor's signature: _____ Date: _____

Residence: _____ (Street, City, State, Zip Code, Country) _____

Citizenship _____

Post Office Address _____

Additional inventors are listed on the attached sheet, PTO/SB/02A - Supplemental Additional Inventor(s) Sheet or similar sheet.